

<i>SERFF Tracking Number:</i>	<i>AGNY-125791033</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>New Hampshire Insurance Company</i>	<i>State Tracking Number:</i>	<i>EFT \$25</i>
<i>Company Tracking Number:</i>	<i>AIC-08-EO-11</i>		
<i>TOI:</i>	<i>17.1 Other Liability - Claims Made Only</i>	<i>Sub-TOI:</i>	<i>17.1019 Professional Errors & Omissions Liability</i>
<i>Product Name:</i>	<i>Architects & Engineers Professional Liability Program - 151640288</i>		
<i>Project Name/Number:</i>	<i>Architects & Engineers Professional Liability Program /AIC-08-EO-11</i>		

Filing at a Glance

Company: New Hampshire Insurance Company

Product Name: Architects & Engineers Professional Liability Program - 151640288
 SERFF Tr Num: AGNY-125791033 State: Arkansas

TOI: 17.1 Other Liability - Claims Made Only	SERFF Status: Closed	State Tr Num: EFT \$25
Sub-TOI: 17.1019 Professional Errors & Omissions Liability	Co Tr Num: AIC-08-EO-11	State Status: Fees verified and received
Filing Type: Rule	Co Status:	Reviewer(s): Betty Montesi, Edith Roberts

Author: Janine Graham
 Date Submitted: 10/13/2008
 Disposition Date: 11/25/2008
 Disposition Status: Filed

Effective Date Requested (New): On Approval
 Effective Date Requested (Renewal): On Approval
 Effective Date (New):
 Effective Date (Renewal):
 State Filing Description:

General Information

Project Name: Architects & Engineers Professional Liability Program	Status of Filing in Domicile: Pending
Project Number: AIC-08-EO-11	Domicile Status Comments: This filing is being simultaneously in all states.
Reference Organization: N/A	Reference Number: N/A
Reference Title: N/A	Advisory Org. Circular: N/A
Filing Status Changed: 11/25/2008	
State Status Changed: 10/27/2008	Deemer Date:
Corresponding Filing Tracking Number: AGNY-125791032	

Filing Description:

New Hampshire Insurance Company (the "Company") submits for your review and approval its revised manual pages to replace its Architects and Engineers Professional Liability Manual Pages currently on file with your Department (filing no. AIC-07-EO-26). The Company proposes the following changes to the current rules:

SERFF Tracking Number: AGNY-125791033 State: Arkansas

Filing Company: New Hampshire Insurance Company State Tracking Number: EFT \$25

Company Tracking Number: AIC-08-EO-11

TOI: 17.1 Other Liability - Claims Made Only Sub-TOI: 17.1019 Professional Errors & Omissions Liability

Product Name: Architects & Engineers Professional Liability Program - 151640288

Project Name/Number: Architects & Engineers Professional Liability Program /AIC-08-EO-11

- 1) Addition of two (2) credit factors for deductible amounts of \$30,000 and \$40,000
- 2) Addition of a premium charge for Aggregate Deductible Endorsement – 97056.

No rate impact will result from these changes.

Please refer to page three (3) of the attached manual for information about the rules included in this submission. Also refer to the attached blackline to see revisions made to the previous page.

As required, the forms are being submitted separately.

Company and Contact

Filing Contact Information

Janine Graham, Filings Analyst Janine.Graham@AIG.com
 175 Water Street (212) 458-7463 [Phone]
 New York, NY 10038 (212) 458-7077[FAX]

Filing Company Information

New Hampshire Insurance Company CoCode: 23841 State of Domicile: Pennsylvania
 70 Pine Street Group Code: Company Type:
 New York, NY 10270 Group Name: State ID Number:
 (212) 770-7000 ext. [Phone] FEIN Number: 02-0172170

Filing Fees

Fee Required? Yes
 Fee Amount: \$25.00
 Retaliatory? No
 Fee Explanation: \$25.00 per Rule Filing per group
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
New Hampshire Insurance Company	\$25.00	10/13/2008	23146885

<i>SERFF Tracking Number:</i>	<i>AGNY-125791033</i>	<i>State:</i>	<i>Arkansas</i>
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Edith Roberts	11/25/2008	11/25/2008

Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Edith Roberts	10/27/2008	10/27/2008	Janine Graham	10/27/2008	10/27/2008

<i>SERFF Tracking Number:</i>	<i>AGNY-125791033</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>New Hampshire Insurance Company</i>	<i>State Tracking Number:</i>	<i>EFT \$25</i>
<i>Company Tracking Number:</i>	<i>AIC-08-EO-11</i>		
<i>TOI:</i>	<i>17.1 Other Liability - Claims Made Only</i>	<i>Sub-TOI:</i>	<i>17.1019 Professional Errors & Omissions Liability</i>
<i>Product Name:</i>	<i>Architects & Engineers Professional Liability Program - 151640288</i>		
<i>Project Name/Number:</i>	<i>Architects & Engineers Professional Liability Program /AIC-08-EO-11</i>		

Disposition

Disposition Date: 11/25/2008

Effective Date (New):

Effective Date (Renewal):

Status: Filed

Comment:

Company Name:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Premium:	Maximum % Change (where required):	Minimum % Change (where required):	Overall % Indicated Change:
New Hampshire Insurance Company	0.150%	\$33,000	2,400	\$22,062,000	1.500%	0.000%	0.150%

SERFF Tracking Number: AGNY-125791033 State: Arkansas

Filing Company: New Hampshire Insurance Company State Tracking Number: EFT \$25

Company Tracking Number: AIC-08-EO-11

TOI: 17.1 Other Liability - Claims Made Only Sub-TOI: 17.1019 Professional Errors & Omissions Liability

Product Name: Architects & Engineers Professional Liability Program - 151640288

Project Name/Number: Architects & Engineers Professional Liability Program /AIC-08-EO-11

Item Type	Item Name	Item Status	Public Access
Supporting Document (revised)	Uniform Transmittal Document-Property & Casualty	Filed	Yes
Supporting Document	Uniform Transmittal Document-Property & Casualty	Filed	Yes
Supporting Document	NAIC Loss Cost Filing Document for OTHER than Workers' Comp	Filed	Yes
Supporting Document	NAIC loss cost data entry document	Filed	Yes
Supporting Document	Explanatory Memorandum	Filed	Yes
Supporting Document	Blackline	Filed	Yes
Rate	Architects & Engineers Professional Liability Program Manual Pages	Filed	Yes

SERFF Tracking Number: AGNY-125791033 State: Arkansas
Filing Company: New Hampshire Insurance Company State Tracking Number: EFT \$25
Company Tracking Number: AIC-08-EO-11
TOI: 17.1 Other Liability - Claims Made Only Sub-TOI: 17.1019 Professional Errors & Omissions Liability
Product Name: Architects & Engineers Professional Liability Program - 151640288
Project Name/Number: Architects & Engineers Professional Liability Program /AIC-08-EO-11

Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 10/27/2008
Submitted Date 10/27/2008
Respond By Date
Dear Janine Graham,

This will acknowledge receipt of the captioned filing.

Why is there a 1.5% rate increase. Isn't the aggregate deductible endorsement optional?

Also, you will need to complete the NAIC Transmittal.

Please feel free to contact me if you have questions.

Sincerely,
Edith Roberts

Response Letter

Response Letter Status Submitted to State
Response Letter Date 10/27/2008
Submitted Date 10/27/2008

Dear Edith Roberts,

Comments:

Response 1

Comments: Thank you for your letter today. The overall impact is .15%. We have assumed that 10% of our book will purchase the optional endorsement. Only an insured who elects the endorsement will be charged 1.5% of the overall premium. Please see the attached Property and Casualty Transmittal Document under the Supporting Documentation tab.

Changed Items:

SERFF Tracking Number: *AGNY-125791033* *State:* *Arkansas*
Filing Company: *New Hampshire Insurance Company* *State Tracking Number:* *EFT \$25*
Company Tracking Number: *AIC-08-EO-11*
TOI: *17.1 Other Liability - Claims Made Only* *Sub-TOI:* *17.1019 Professional Errors & Omissions Liability*

Product Name: *Architects & Engineers Professional Liability Program - 151640288*
Project Name/Number: *Architects & Engineers Professional Liability Program /AIC-08-EO-11*

Supporting Document Schedule Item Changes

Satisfied -Name: Uniform Transmittal Document-Property & Casualty
Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Sincerely,
Janine Graham

SERFF Tracking Number:	AGNY-125791033	State:	Arkansas
Filing Company:	New Hampshire Insurance Company	State Tracking Number:	EFT \$25
Company Tracking Number:	AIC-08-EO-11		
TOI:	17.1 Other Liability - Claims Made Only	Sub-TOI:	17.1019 Professional Errors & Omissions Liability
Product Name:	Architects & Engineers Professional Liability Program - 151640288		
Project Name/Number:	Architects & Engineers Professional Liability Program /AIC-08-EO-11		

Rate Information

Rate data applies to filing.

Filing Method:	Prior Approval
Rate Change Type:	Increase
Overall Percentage of Last Rate Revision:	0.000%
Effective Date of Last Rate Revision:	12/10/2007
Filing Method of Last Filing:	Prior Approval

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Premium:	Maximum % Change (where required):	Minimum % Change (where required):
New Hampshire Insurance Company	0.150%	0.150%	\$33,000	2,400	\$22,062,000	1.500%	0.000%

<i>SERFF Tracking Number:</i>	<i>AGNY-125791033</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>New Hampshire Insurance Company</i>	<i>State Tracking Number:</i>	<i>EFT \$25</i>
<i>Company Tracking Number:</i>	<i>AIC-08-EO-11</i>		
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<i>Product Name:</i>	<i>Architects & Engineers Professional Liability Program - 151640288</i>		
<i>Project Name/Number:</i>	<i>Architects & Engineers Professional Liability Program /AIC-08-EO-11</i>		

Rate/Rule Schedule

Review Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Attachments Number:
Filed	Architects & Engineers Professional Liability Program Manual Pages	3	New	AR - Architects Rate Sheet.pdf

**NEW HAMPSHIRE INSURANCE COMPANY
ARCHITECTS & ENGINEERS
PROFESSIONAL LIABILITY INSURANCE PROGRAM
ARKANSAS**

BASE RATES

Base rates per \$100 of billings (for \$100,000/\$100,000 coverage):

<u>Gross Billings</u>		<u>Tiered Base Rate</u>
First	\$500,000	1.346
Next	\$2,500,000	0.640
Next	\$2,000,000	0.350

MINIMUM PREMIUMS

Minimum premiums below are for the basic limit, subject to increased limit factors:

Architect/Engineer- all Firms including Agency Construction Management:	\$	500
At Risk Construction Management & > 25% Structural	\$	3,000
Interior Design, Landscape A/E's, Land Surveyors	\$	500
Expert Witness and Litigation Consultants	\$	500

DEDUCTIBLES

The base rates are predicated on a base deductible of 1% of the total billings. Maximum deductible is 3% of the total billings.

<u>Gross Billings</u>	<u>Minimum Base Deductibles</u>
up to \$250,000	\$2,500
\$250,001 to \$500,000	\$5,000
\$500,001 to \$750,000	\$7,500
\$750,001 to \$2,500,000	\$10,000
\$2,500,001 to \$5,000,000	\$15,000

MINIMUM DEDUCTIBLE: Minimum Deductible: \$5,000 per claim on Structural
All others: \$2,500 per claim

DEDUCTIBLE CREDITS:

When a deductible is other than the minimum of \$2,500, the factor is determined by dividing the factor for the desired deductible by the factor for the base deductible.

<u>Deductible</u>	<u>Credit%</u>
\$5,000	.07
\$7,500	.15
\$10,000	.21
\$12,500	.27
\$15,000	.29
\$17,500	.32
\$20,000	.34
\$22,500	.37
\$25,000	.40
\$30,000	.42
\$40,000	.46
\$50,000	.50

Credits are multiplied against the adjusted base premium and are subtracted from the premium derived after application of the increased limits factor.

OPTIONAL AGGREGATE DEDUCTIBLE:

Determine additional premium by multiplying the annual policy premium by .015. Add this additional premium to annual policy premium before determining applicability of the minimum premium rule.

PRIOR ACTS COVERAGE

The base rates shown contemplate full prior acts coverage. If prior acts coverage is limited, the following credit factors are to be applied to the base premium:

<u>Retroactive Dates</u>	<u>Prior Acts Factor</u>
Inception	.75
One Year	.85
Two Years	.95
Three or more Years	1.00

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DISCIPLINE AND PROJECT ADJUSTMENTS

Discipline and Project Adjustment Factors are to be applied to any firm with in-house activities in the following disciplines and projects shown below. Multiple Discipline firms and Multiple Projects should be rated on a weighted basis.

<u>Discipline</u>	<u>Debit</u>	<u>Credit</u>
1. Feasibility Studies & Services NOT Resulting in Construction		.75
2. Interior Design & Landscape Architecture		.60
3. Electrical Engineering- non utility/power plant or heavy industrial		.50
4. Mechanical Engineering		.25
5. Land Surveying, Mapping, Aerial Surveys, Topography, Site Development, Environmental Impact Statements, Wetlands/Flood Plain Studies, Transportation Consultants		.40
6. HVAC Engineering		.10
7. Architecture		.10
8. Civil Engineering N.O.C.	-0-	-0-
9. Structural Engineering	.70	
10. Process Engineering (Chemical/Oil/Gas Refining or Processing Facilities)	.60	
11. Process Engineering Other (Including Waste water treatment, electrical power plants, pulp/paper mills, other heavy industrial facilities)	.45	
12. Environmental Engineering -- N.O.C.	.35	
13. Asbestos Abatement Design/Sampling or Verification	.60	
14. Environmental Risk Assessment and Regulatory Audits & Environmental Permitting		.50
15. Environmental Real Estate Audits	.70	
16. Environmental Remediation Design/Specifications	.60	
17. Construction Management - Agency (No site safety responsibility)		.15
18. Construction Management- At Risk	.70	
19. Laboratory Testing/Analysis-- No Sampling	-0-	-0-
<u>Projects</u>	<u>Debit</u>	
1. Condominium Projects	1.00	
2. Residential & Multi-Unit - not condominium	.25	
3. Pipelines - Oil/Gas	.25	
4. Parking Structures, Arenas, Convention Centers	.35	
5. Bridges; Tunnels; Dams	.35	
6. Solid Waste/Landfill - siting or design if <50%	.50	
7. Wastewater treatment facilities	.35	
8. Sewer/Water Lines	.15	
9. Highway/Road Design, no bridges	.10	

Project Adjustment Factors apply in addition to the discipline adjustments

CLAIM AND EXPERIENCE FACTORS

Debits and Credits are shown as maximums.

a. Insureds with Gross Billings less than or equal to \$500,000 and total incurred losses below \$10,000:

<u>Number of Claims</u>	<u>Debit</u>	<u>Credit</u>
0 - 1		15%
2		7%
3	7%	
4 or more	15%	

Insureds with total incurred losses exceeding \$10,000 will be rated in accordance with the rules in c., with maximum applicable credit of 15%.

b. Insureds with Gross billings greater than \$500,000 and less than or equal to \$1,000,000 and total incurred losses not to exceed \$15,000:

<u>Number of Claims</u>	<u>Debit</u>	<u>Credit</u>
0 - 1		20%
2		10%
3	10%	
4 or more	20%	

Insureds with total incurred losses exceeding \$15,000 will be rated in accordance with the rules in c.

Rev. 6/08

- c. Insureds with Gross billings greater than \$1,000,000. The loss ratio is calculated by dividing the Insured's total incurred loss (including legal expenses) in excess of any deductibles by the total premium the insured paid.

<u>Loss Ratio</u>	<u>Debit</u>	<u>Credit</u>
0% - 30%		15%
31% - 40%		10%
41% - 50%		5%
51% - 60%	5%	
61% - 70%	10%	
71% - 80%	15%	
81% - 95%	20%	
96% - 110%	25%	
111% - 125%	30%	
126% - 140%	40%	
141% - 160%	50%	
161% - 180%	60%	
181% +	100%	

INCREASED LIMIT FACTORS

<u>Limits of Liability</u>	<u>Factor</u>
\$100,000/\$100,000	1.00
\$100,000/\$250,000	1.10
\$250,000/\$250,000	1.60
\$250,000/\$500,000	1.76
\$500,000/\$500,000	2.00
\$500,000/\$1,000,000	2.20
\$1,000,000/\$1,000,000	2.50
\$1,000,000/\$2,000,000	2.75
\$2,000,000/\$2,000,000	3.10
\$3,000,000/\$3,000,000	3.50
\$4,000,000/\$4,000,000	4.00
\$5,000,000/\$5,000,000	4.50

RISK MANAGEMENT/RISK CONTROL CREDIT/DEBIT

15% Maximum allowed. The credit or debit applied is intended to reflect the quality of the business practices and risk management controls as determined from the risk management/risk control supplemental application. A completed Risk Management/Risk Control Supplement MUST be obtained.

SCHEDULE RATING PLAN

<u>Characteristics</u>	<u>Modification Range</u>	
	<u>Debit(+)</u>	<u>Credit(-)</u>
Foreign Work	25%	25%
Type of Project	25%	25%
Type of Client/ Project Owner	25%	25%
Contractual Practices	25%	25%
Multi-Year Exposures	25%	25%
Firm history/Qualifications/Expertise	25%	25%
Firm Financial Condition/Growth History/Plans	25%	25%
Unusual Liability Exposures/Office Sharing/ Other Office Locations	25%	25%
Maximum Debit/Credit	50%	50%

EXTENDED REPORTING PERIOD OPTION

12 Months	100% of total annual policy premium
36 Months	200% of total annual policy premium
60 Months	275% of total annual policy premium

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<i>SERFF Tracking Number:</i>	<i>AGNY-125791033</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>New Hampshire Insurance Company</i>	<i>State Tracking Number:</i>	<i>EFT \$25</i>
<i>Company Tracking Number:</i>	<i>AIC-08-EO-11</i>		
<i>TOI:</i>	<i>17.1 Other Liability - Claims Made Only</i>	<i>Sub-TOI:</i>	<i>17.1019 Professional Errors & Omissions Liability</i>
<i>Product Name:</i>	<i>Architects & Engineers Professional Liability Program - 151640288</i>		
<i>Project Name/Number:</i>	<i>Architects & Engineers Professional Liability Program /AIC-08-EO-11</i>		

Supporting Document Schedules

Satisfied -Name:	Uniform Transmittal Document-Property & Casualty	Review Status:	Filed	11/25/2008
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Comments:

Attachment:

10-13-08 AR - PCTD (Rules).pdf

Bypassed -Name:	NAIC Loss Cost Filing Document for OTHER than Workers' Comp	Review Status:	Filed	11/25/2008
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Bypass Reason: Not Applicable.

Comments:

Bypassed -Name:	NAIC loss cost data entry document	Review Status:	Filed	11/25/2008
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Bypass Reason: Not Applicable.

Comments:

Satisfied -Name:	Explanatory Memorandum	Review Status:	Filed	11/25/2008
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Comments:

Attachment:

Explanatory Memorandum - AE.pdf

Satisfied -Name:	Blackline	Review Status:	Filed	11/25/2008
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Comments:

Attachment:

AR - Blackline.pdf

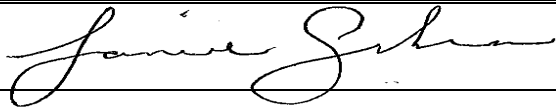
Property & Casualty Transmittal Document

1. Reserved for Insurance Dept. Use Only	2. Insurance Department Use only	
	a. Date the filing is received:	
	b. Analyst:	
	c. Disposition:	
	d. Date of disposition of the filing:	
	e. Effective date of filing:	
	New Business	
	Renewal Business	
	f. State Filing #:	
	g. SERFF Filing #:	
h. Subject Codes		

3. Group Name	American International Group, Inc.				Group NAIC #	012
4. Company Name(s)	Domicile	NAIC #	FEIN #	State #		
New Hampshire Insurance Company	PA	23841	02-0172170			

5. Company Tracking Number	AIC-08-EO-11
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6. Name and address	Title	Telephone #s	FAX #	e-mail
Janine Graham 175 Water Street, 17 th Floor New York, New York 10038	Fileings Analyst	(212) 458-7463	(212) 458-7077	janine.graham@aig.com
7. Signature of authorized filer				
8. Please print name of authorized filer	Janine Graham			

Filing information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	17.1000 Other Liability – Claims Made Only
10. Sub-Type of Insurance (Sub-TOI)	17.1019 Professional Errors & Omissions Liability
11. State Specific Product code(s)(if applicable)[See State Specific Requirements]	
12. Company Program Title (Marketing title)	Commercial Property Extension Program
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input checked="" type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14. Effective Date(s) Requested	New: On Approval Renewal: On Approval
15. Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16. Reference Organization (if applicable)	N/A
17. Reference Organization # & Title	N/A
18. Company's Date of Filing	October 13, 2008
19. Status of filing in domicile	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document—

20.	This filing transmittal is part of Company Tracking #	AIC-08-EO-11
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21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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New Hampshire Insurance Company (the “Company”) submits for your review and approval its revised manual pages to replace its Architects and Engineers Professional Liability Manual Pages currently on file with your Department (filing no. AIC-07-EO-26). The Company proposes the following changes to the current rules:

- 1) Addition of two (2) credit factors for deductible amounts of \$30,000 and \$40,000
- 2) Addition of a premium charge for Aggregate Deductible Endorsement – 97056.

Please refer to page 3 of the attached manual for information about the rules included in this submission. Also refer to the attached blackline to see revisions made to the previous page.

As required the forms for this filing are being submitted separately.

22.	Filing Fees (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]
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Check #: N/A
Amount: \$25.00

Refer to each state’s checklist for additional state specific requirements or instructions on calculating fees.

*****Refer to the each state’s checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)**

RATE/RULE FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes rate-related items such as Rate; Rule; Rate & Rule; Reference; Loss Cost; Loss Cost & Rule or Rate, etc.)

(Do not refer to the body of the filing for the component/exhibit listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	AIC-08-EO-11
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2.	This filing corresponds to form filing number (Company tracking number of form filing, if applicable)	
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☒ Rate Increase ☐ Rate Decrease ☐ Rate Neutral (0%)

3.	Filing Method (Prior Approval, File & Use, Flex Band, etc.)	Prior Approval
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4a.	Rate Change by Company (As Proposed)
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Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change (where required)	Minimum % Change (where required)
New Hampshire Insurance Company	.15%	.15%	33,00	2,400	22,062,000	1.5%	0%

4b.	Rate Change by Company (As Accepted) For State Use Only
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Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change	Minimum % Change

5.	Overall Rate Information (Complete for Multiple Company Filings only)
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		COMPANY USE	STATE USE
5a	Overall percentage rate indication (when applicable)		
5b	Overall percentage rate impact for this filing		
5c	Effect of Rate Filing – Written premium change for this program		
5d	Effect of Rate Filing – Number of policyholders affected		

6.	Overall percentage of last rate revision	0%
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7.	Effective Date of last rate revision	12-01-2006
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8.	Filing Method of Last filing (Prior Approval, File & Use, Flex Band, etc.)	Prior Approval
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9.	Rule # or Page # Submitted for Review	Replacement or withdrawn?	Previous state filing number, if required by state
01	Architects & Engineers Professional Liability Program Manual Pages	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
01		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	

**Explanatory Memorandum
AIC-08-EO-11
Architects and Engineers Program
Professional Liability**

Submitted for your approval are five (5) new endorsements, a renewal application and a revision to the manual pages regarding deductibles that enhance and clarify coverage for the above program.

We are filing the following forms for your approval:

1. Retroactive Limits Endorsement - 97054

This optional endorsement provides underwriting flexibility to change the retroactive date as respects certain limits of liability.

There is no additional premium charge.

2. Additional Project Specific Retroactive Dates - 97055

This optional endorsement provides the ability to modify retroactive dates for specific projects.

There is no additional premium charge.

3. Aggregate Deductible Endorsement - 97056

This optional endorsement provides an aggregate amount of deductible to the insured for all claims made during the policy period.

The premium charge is 1.5% of the annual policy premium.

Pricing Support - In our judgment, the risk of a client within this profession having more than three separate claims in a single policy period is very low, as is the financial impact to the company of providing for a maximum amount a policyholder is liable for with respect to their deductible responsibility. The market place requires that we provide an option for this additional coverage. This premium charge is in line with our competitors.

4. Pollution Incident Endorsement - 97057

This optional endorsement extends professional coverage for breach of professional duty resulting in a pollution incident.

There is no additional premium charge.

5. Reimbursement for Regulatory Actions – 97058

This mandatory endorsement provides for reimbursement of defense costs for regulatory actions under the ADA, FHA, and OSHA.

There is no additional premium charge.

6. Renewal Application – 99741

This renewal application is made part of the policy.

Deductible Credits

We have added two (2) credit factors for deductible amounts of \$30,000 and \$40,000.

**NEW HAMPSHIRE INSURANCE COMPANY
ARCHITECTS & ENGINEERS
PROFESSIONAL LIABILITY INSURANCE PROGRAM
ARKANSAS**

BASE RATES

Base rates per \$100 of billings (for \$100,000/\$100,000 coverage):

<u>Gross Billings</u>		<u>Tiered Base Rate</u>
First	\$500,000	1.346
Next	\$2,500,000	0.640
Next	\$2,000,000	0.350

MINIMUM PREMIUMS

Minimum premiums below are for the basic limit, subject to increased limit factors:

Architect/Engineer- all Firms including Agency Construction Management:	\$	500
At Risk Construction Management & > 25% Structural	\$	3,000
Interior Design, Landscape A/E's, Land Surveyors	\$	500
Expert Witness and Litigation Consultants	\$	500

DEDUCTIBLES

The base rates are predicated on a base deductible of 1% of the total billings. Maximum deductible is 3% of the total billings.

<u>Gross Billings</u>	<u>Minimum Base Deductibles</u>
up to \$250,000	\$2,500
\$250,001 to \$500,000	\$5,000
\$500,001 to \$750,000	\$7,500
\$750,001 to \$2,500,000	\$10,000
\$2,500,001 to \$5,000,000	\$15,000

MINIMUM DEDUCTIBLE: Minimum Deductible: \$5,000 per claim on Structural
All others: \$2,500 per claim

DEDUCTIBLE CREDITS:

When a deductible is other than the minimum of \$2,500, the factor is determined by dividing the factor for the desired deductible by the factor for the base deductible.

<u>Deductible</u>	<u>Credit%</u>
\$5,000	.07
\$7,500	.15
\$10,000	.21
\$12,500	.27
\$15,000	.29
\$17,500	.32
\$20,000	.34
\$22,500	.37
\$25,000	.40
<u>\$30,000</u>	<u>.42</u>
<u>\$40,000</u>	<u>.46</u>
\$50,000	.50

Credits are multiplied against the adjusted base premium and are subtracted from the premium derived after application of the increased limits factor.

OPTIONAL AGGREGATE DEDUCTIBLE:

Determine additional premium by multiplying the annual policy premium by .015. Add this additional premium to annual policy premium before determining applicability of the minimum premium rule.

PRIOR ACTS COVERAGE

The base rates shown contemplate full prior acts coverage. If prior acts coverage is limited, the following credit factors are to be applied to the base premium:

<u>Retroactive Dates</u>	<u>Prior Acts Factor</u>
Inception	.75
One Year	.85
Two Years	.95
Three or more Years	1.00

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DISCIPLINE AND PROJECT ADJUSTMENTS

Discipline and Project Adjustment Factors are to be applied to any firm with in-house activities in the following disciplines and projects shown below. Multiple Discipline firms and Multiple Projects should be rated on a weighted basis.

<u>Discipline</u>	<u>Debit</u>	<u>Credit</u>
1. Feasibility Studies & Services NOT Resulting in Construction		.75
2. Interior Design & Landscape Architecture		.60
3. Electrical Engineering- non utility/power plant or heavy industrial		.50
4. Mechanical Engineering		.25
5. Land Surveying, Mapping, Aerial Surveys, Topography, Site Development, Environmental Impact Statements, Wetlands/Flood Plain Studies, Transportation Consultants		.40
6. HVAC Engineering		.10
7. Architecture		.10
8. Civil Engineering N.O.C.	-0-	-0-
9. Structural Engineering	.70	
10. Process Engineering (Chemical/Oil/Gas Refining or Processing Facilities)	.60	
11. Process Engineering Other (Including Waste water treatment, electrical power plants, pulp/paper mills, other heavy industrial facilities)	.45	
12. Environmental Engineering -- N.O.C.	.35	
13. Asbestos Abatement Design/Sampling or Verification	.60	
14. Environmental Risk Assessment and Regulatory Audits & Environmental Permitting		.50
15. Environmental Real Estate Audits	.70	
16. Environmental Remediation Design/Specifications	.60	
17. Construction Management - Agency (No site safety responsibility)		.15
18. Construction Management- At Risk	.70	
19. Laboratory Testing/Analysis-- No Sampling	-0-	-0-
<u>Projects</u>	<u>Debit</u>	
1. Condominium Projects	1.00	
2. Residential & Multi-Unit - not condominium	.25	
3. Pipelines - Oil/Gas	.25	
4. Parking Structures, Arenas, Convention Centers	.35	
5. Bridges; Tunnels; Dams	.35	
6. Solid Waste/Landfill - siting or design if <50%	.50	
7. Wastewater treatment facilities	.35	
8. Sewer/Water Lines	.15	
9. Highway/Road Design, no bridges	.10	

Project Adjustment Factors apply in addition to the discipline adjustments

CLAIM AND EXPERIENCE FACTORS

Debits and Credits are shown as maximums.

a. Insureds with Gross Billings less than or equal to \$500,000 and total incurred losses below \$10,000:

<u>Number of Claims</u>	<u>Debit</u>	<u>Credit</u>
0 - 1		15%
2		7%
3	7%	
4 or more	15%	

Insureds with total incurred losses exceeding \$10,000 will be rated in accordance with the rules in c., with maximum applicable credit of 15%.

b. Insureds with Gross billings greater than \$500,000 and less than or equal to \$1,000,000 and total incurred losses not to exceed \$15,000:

<u>Number of Claims</u>	<u>Debit</u>	<u>Credit</u>
0 - 1		20%
2		10%
3	10%	
4 or more	20%	

Insureds with total incurred losses exceeding \$15,000 will be rated in accordance with the rules in c.

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- c. Insureds with Gross billings greater than \$1,000,000. The loss ratio is calculated by dividing the Insured's total incurred loss (including legal expenses) in excess of any deductibles by the total premium the insured paid.

<u>Loss Ratio</u>	<u>Debit</u>	<u>Credit</u>
0% - 30%		15%
31% - 40%		10%
41% - 50%		5%
51% - 60%	5%	
61% - 70%	10%	
71% - 80%	15%	
81% - 95%	20%	
96% - 110%	25%	
111% - 125%	30%	
126% - 140%	40%	
141% - 160%	50%	
161% - 180%	60%	
181% +	100%	

INCREASED LIMIT FACTORS

<u>Limits of Liability</u>	<u>Factor</u>
\$100,000/\$100,000	1.00
\$100,000/\$250,000	1.10
\$250,000/\$250,000	1.60
\$250,000/\$500,000	1.76
\$500,000/\$500,000	2.00
\$500,000/\$1,000,000	2.20
\$1,000,000/\$1,000,000	2.50
\$1,000,000/\$2,000,000	2.75
\$2,000,000/\$2,000,000	3.10
\$3,000,000/\$3,000,000	3.50
\$4,000,000/\$4,000,000	4.00
\$5,000,000/\$5,000,000	4.50

RISK MANAGEMENT/RISK CONTROL CREDIT/DEBIT

15% Maximum allowed. The credit or debit applied is intended to reflect the quality of the business practices and risk management controls as determined from the risk management/risk control supplemental application. A completed Risk Management/Risk Control Supplement MUST be obtained.

SCHEDULE RATING PLAN

<u>Characteristics</u>	<u>Modification Range</u>	
	<u>Debit(+)</u>	<u>Credit(-)</u>
Foreign Work	25%	25%
Type of Project	25%	25%
Type of Client/ Project Owner	25%	25%
Contractual Practices	25%	25%
Multi-Year Exposures	25%	25%
Firm history/Qualifications/Expertise	25%	25%
Firm Financial Condition/Growth History/Plans	25%	25%
Unusual Liability Exposures/Office Sharing/ Other Office Locations	25%	25%
Maximum Debit/Credit	25%	25%

EXTENDED REPORTING PERIOD OPTION

12 Months	100% of total annual policy premium
36 Months	200% of total annual policy premium
60 Months	275% of total annual policy premium

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<i>SERFF Tracking Number:</i>	<i>AGNY-125791033</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>New Hampshire Insurance Company</i>	<i>State Tracking Number:</i>	<i>EFT \$25</i>
<i>Company Tracking Number:</i>	<i>AIC-08-EO-11</i>		
<i>TOI:</i>	<i>17.1 Other Liability - Claims Made Only</i>	<i>Sub-TOI:</i>	<i>17.1019 Professional Errors & Omissions Liability</i>
<i>Product Name:</i>	<i>Architects & Engineers Professional Liability Program - 151640288</i>		
<i>Project Name/Number:</i>	<i>Architects & Engineers Professional Liability Program /AIC-08-EO-11</i>		

Superseded Attachments

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Original Date:	Schedule	Document Name	Replaced Date	Attach Document
No original date	Supporting Document	Uniform Transmittal Document-Property & Casualty	08/26/2008	